UTILITY **PATENT APPLICATION TRANSMITTAL** *(only for new nonprovisional applications under 37 CFR 1 53(b))*	Attorney Docket No.	216535US2S
	First Inventor or Application Identifier	Jun HASEGAWA
	Title	CODE SYNCHRONOUS TIMING DETERMINING METHOD UPON INFORMATION RECEPTION IN CDMA SYSTEM, DETERMINING APPARATUS, AND CDMA RECEIVING APPARATUS
	Assignee Name:	
	Assignee Address:	

APPLICATION ELEMENTS
See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. ■ Fee Transmittal Form (e.g. PTO/SB/17)
(Submit an original and a duplicate for fee processing)

2. ■ Specification   Total Sheets **60**

3. ■ Formal Drawing(s)
(35 U.S.C. 113)   Total Sheets **8**

4. ■ Oath or Declaration   Total Pages **2**

   a. ■ Newly executed (original)

   b. □ Copy from a prior application (37 C.F.R, §1.63(d))
   (for continuation / divisional w/ box 17 completed)

   i. □ DELETION OF INVENTOR(S)
   Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1 33(b).

5. □ CD-ROM or CD-R in duplicate, large table or Computer Program (*Appendix*)

6. □ Nucleotide and/or Amino Acid Sequence Submission (*if applicable, all necessary*)

   a. □ Computer Readable Form (CRF)

   b. Specification or Sequence Listing on:

   i. □ CD-ROM or CD-R (2 copies); or

   ii. □ Paper

   c. □ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. ■ Assignment Papers (cover sheet & document(s))

8. ■ Application Data Sheet. See 37 CFR 1.76

9. □ 37 C.F.R. §3.73(b) Statement
(when there is an assignee)   □ Power of Attorney

10. □ English Translation Document (*if applicable*)

11. ■ Information Disclosure Statement (IDS)/PTO-1449   ■ Copies of IDS Citations (2)

12. □ Preliminary Amendment

13. ■ White Advance Serial No. Postcard

14. ■ Certified Copy of Priority Document(s) (1)
(if foreign priority is claimed)

15. □ Applicant claims small entity status.
See 37 CFR 1.27

16. ■ Other: Request for Priority, Statement of Relevancy

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17. If a CONTINUING APPLICATION, *check appropriate box, and supply the requisite information below:*

□ Continuation   □ Divisional   □ Continuation-in-part (CIP)   of prior application no.:

Prior application information: Examiner: Group Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.

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18. Amend the specification by inserting before the first line the sentence:

□ This application is a   □ Continuation   □ Division   □ Continuation-in-part (CIP)
of application Serial No.   Filed on

□ Which was published in English

□ Which was not published in English

□ This application claims priority of provisional application Serial No.   Filed

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19. CORRESPONDENCE ADDRESS

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Name:	Marvin J. Spivak	Registration No.:	24,913
Signature:	*[signature]*	Date:	11/23/01
Name:	C. Irvin McClelland	Registration No.:	
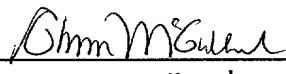
Registration Number 21,124

Docket No. 216535US2S

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Jun HASEGAWA

SERIAL NO: New Application

FILING DATE: Herewith

FOR: CODE SYNCHRONOUS TIMING DETERMINING METHOD UPON INFORMATION RECEPTION IN CDMA SYSTEM, DETERMINING APPARATUS, AND CDMA RECEIVING APPARATUS

FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	32 - 20 =	12	× $18 =	$216.00
INDEPENDENT CLAIMS	5 - 3 =	2	× $84 =	$168.00
☐ MULTIPLE DEPENDENT CLAIMS (If applicable)			+ $280 =	$0.00
☐ LATE FILING OF DECLARATION			+ $130 =	$0.00
			BASIC FEE	$740.00
		TOTAL OF ABOVE CALCULATIONS		$1,124.00
☐ REDUCTION BY 50% FOR FILING BY SMALL ENTITY				$0.00
☐ FILING IN NON-ENGLISH LANGUAGE			+ $130 =	$0.00
■ RECORDATION OF ASSIGNMENT			+ $40 =	$40.00
			TOTAL	$1,164.00

☐ Please charge Deposit Account No. 15-0030 in the amount of   A duplicate copy of this sheet is enclosed.

■ A check in the amount of   **$1,164.00**   to cover the filing fee is enclosed.

■ The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

Date: _____ 11/23/01 _____

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